

**2007 Corporation Estimated Tax****100-ES**

For calendar year 2007 or fiscal year beginning month _____ day _____ year _____, and ending month _____ day _____ year _____		
This entity will file Form (fill in only one circle): <input type="radio"/> 100, 100W, or 100S <input type="radio"/> 109		<b>Installment 1</b> Due by the 15th day of 4th month of tax year; for weekend or holiday, see instructions.
Return this form with a check or money order payable to: <b>FRANCHISE TAX BOARD, PO BOX 942857, SACRAMENTO CA 94257-0531</b>		
<b>If no payment is due, do not mail this form.</b>		
California corporation number	Federal employer identification number (FEIN)	Contact telephone no.
Corporation name		<b>Estimated Tax Amount</b>
Attention: Owner's or Representative's name		<b>QSub Tax Amount</b>
Corporation address including Suite, Room, or PMB no.		<b>Total Installment Amount</b>
City	State	ZIP Code

EFT TAXPAYER: DO NOT MAIL THIS FORM

6101073

Form 100-ES 2006

✂ DETACH HERE \_\_\_\_\_ IF NO PAYMENT IS DUE, DO NOT MAIL THIS FORM \_\_\_\_\_ DETACH HERE ✂

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This entity will file Form (fill in only one circle): <input type="radio"/> 100, 100W, or 100S <input type="radio"/> 109		<b>Installment 2</b> Due by the 15th day of 6th month of tax year; for weekend or holiday, see instructions.
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This entity will file Form (fill in only one circle): <input type="radio"/> 100, 100W, or 100S <input type="radio"/> 109		<b>Installment 3</b> Due by the 15th day of 9th month of tax year; for weekend or holiday, see instructions.
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TAXABLE YEAR

CALIFORNIA FORM

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This entity will file Form (fill in only one circle): <input type="radio"/> 100, 100W, or 100S <input type="radio"/> 109		<b>Installment 4</b> Due by the 15th day of 12th month of tax year; for weekend or holiday, see instructions.
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